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APPLICANTS

Georg-Erwin Arndt, Obermichelbach, GERMANY;

Tom Weidner, Erlangen, GERMANY;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input checked="" type="checkbox"/> yes <input type="checkbox"/> no Examiner's Signature <u>SN</u> Initials	STATE OR COUNTRY GERMANY	SHEETS DRAWING 2	TOTAL CLAIMS 10	INDEPENDENT CLAIMS 4
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ADDRESS

000026574
SCHIFF HARDIN, LLP
PATENT DEPARTMENT
6600 SEARS TOWER
CHICAGO , IL
60606-6473

TITLE

FEEDBACK COMPENSATION DEVICE AND METHOD, AND HEARING AID DEVICE EMPLOYING SAME

FILING FEE RECEIVED 1264	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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